

## IAP13 Rec'd PCT/PTO 20 SEP 20060C

PTO/SB/17 (01-06)
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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known			
FEE TRANSI		Application Number	10/509,120-Conf. #3292		
<del>-</del> -		Filing Date	November 29, 2004		
For FY 20	)06	First Named Inventor	Masaru YAMAKOSHI P. C. Martin		
		Examiner Name			
Applicant claims small entity state	us. See 37 CFR 1.27	Art Unit	1655		
TOTAL AMOUNT OF PAYMENT	<b>(\$)</b> 600.00	Attorney Docket No.	1516-0126PUS1		
METHOD OF PAYMENT (check	all that apply)				
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TOTAL AMOUNT OF PAY	MENT	(\$) 600.00		Attorney Docket	No.	1516-0126PUS	S1				
METHOD OF PAYMENT (check all that apply)											
X Check Credit C	ard M	loney Order	None	Other (	please iden	tify):					
Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP											
For the above-identi	fied deposit a	ccount, the D	irector is l	nereby authorize	ed to: (che	ck all that apply)					
Charge fee(s) indicated below Charge fee(s) indicated below, except for								he filing fee			
Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17											
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)											
1. BASIC FILING, SEARCH	=										
		S FEES Small Entity	SEA	RCH FEES Small Entity	EXAMI	NATION FEES Small Entity					
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees I	Paid (\$)			
Utility	300	150	500	250	200	100					
Design	200	100	100	50	130	65					
Plant	200	100	300	150	160	80					
Reissue	300	150	500	250	600	300					
Provisional	200	100	0	. 0	0	0		<u> </u>			
2. EXCESS CLAIM FEES							F== (A)	Small Entity			
Fee Description Each claim over 20 (includi	no Reissues)						Fee (\$) 50	Fee (\$) 25			
Each independent claim over	- ,	g Reissues)					200	100			
Multiple dependent claims	`	0					360	180			
• •					ultiple Depende	nt Claims					
3431 =3		0.00 =	150	.00			ee Paid (§	5)			
HP = highest number of total clair	, ,	eater than 20.						_			
Indep. Claims Extra (		ee (\$)	Fee Pa	aid (\$)							
4 - 5 = (			n 3								
3. APPLICATION SIZE FEE	•	ior, ii greator trio	0.					_			
If the specification and dra listings under 37 CFR 1	wings exceed .52(e)), the a	pplication siz	e fee due	is \$250 (\$125 f	onically fi or small e	led sequence or on the sequence or of the sequence of the sequ	computer Iditional 50	0			
sheets or fraction thereo							_	D 11/0			
<u>Total Sheets</u> <u>Ex</u> - 100 =	tra Sheets	Number /50		ditional 50 or fractional fraction of the frac			ree l	<u>Paid (\$)</u>			
4. OTHER FEE(S)		750		round up to a who	ie number)	^		Paid (\$)			
4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)											
Other (e.g., late filing su		•	•	•	econd mo	onth	45	0.00			
SUBMITTED BY											

Registration No. (Attorney/Agent) Signature 36,623 Telephone (703) 205-8043 Mark J. Nuell Name (Print/Type) Date September 20, 2006

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